PTO/SB/08A (08-03)

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Substitute for form 1449/PTO	Complete if Known		
Substitute for form 1-4 ar 10	Application Number		
INFORMATION DISCLOSURE	Filing Date		
INFORMATION DISCLOSURE	First Named Inventor	Kyle E. E. Schwulst	
STATEMENT BY APPLICANT	Art Unit		
(Use as many sheets as necessary)	Examiner Name		
	Attorney Docket Number		

Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Peges, Columns, Lines, Where
initlals*	No.1	Number-Kind Code <sup>2 (# Impure)</sup>	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Relevant Figures Appear
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	Cite No.		Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	Te
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Examiner Signature	Milles	Date Considered	V 23/04

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Translation is attached.

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